

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>C</i>		
O.I.P.E. CLASSIFIER	<i>BEST AVAILABLE COPY</i>		
FORMALITY REVIEW	<i>F.D.</i>	<i>1121</i>	<i>11/28/01</i>
RESPONSE FORMALITY REVIEW	<i>M.D.</i>	<i>625</i>	<i>01-28-02</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 :- Restricted O Objected

Claim	Date
Final Original	
1	✓ 11/28/01
2	✓
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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5C 533 NL 11/28/01
1809 1/29/02